ease use Helvetica, 7 point font	Fiscal year end date
rport Name	Location ID
onsor Name	State
onsor Employer Identification Number	Date when AIP was last audited as a major program
onsolidated Report? Enter Yes or No	Is this report based on audited information? Please enter Yes or No
runnant of Devenues and Evenues	
ummary of Revenues and Expenses	E. Non-Operating Expenses
Aeronautical Operating Revenue	Interest expense
Landing fees	2. Other Total
Terminal/international arrival area rental or other charge	l Otal \$
Apron charges/tiedowns	
BO revenue: contract or sponsor-operated	F. Depreciation
Cargo and hangar rentals	
Aviation fuel tax retained for airport use	Net (Total A+B+C Less D, E and F)
Fuel sales net profit/loss or fuel flowage fees	
Miscellaneous (not to exceed 5% of Aeronautical)	Other Financial Information
Other (enter total here and add attachment)	G. Reporting Year Proceeds
Total	\$ - 1. Bond proceeds
Total	2. Proceeds from sale of property
Management in all Organism Reviews	Grants and other contributed capital
Nonaeronautical Operating Revenue and and non-terminal facilities	4. Other
Terminal - food and beverage	
•	Total \$
Terminal - retail stores	
Terminal - other	H. Reporting Year Expenditures for Projects
Rental cars	1. Airfield 2. Terminal
Parking Visc. (Should not exceed 5% of total non-aeronautical)	3. Parking
Other (Enter total here and add attachment)	4. Roadways, rail and transit
Total	5. Other
	Total \$
Nonoperating Revenues	
Interest income - restricted and non-restricted	I. Reporting Year Debt Payments Incl. Interest
Grant receipts	
Passenger Facility Charges	J. Indebtedness at End of Year
Other	1. Bonds
Total	\$ - 2. Loans
	3. Other
Operating Expenses	Total 5
Personnel compensation and benefits	
Communications and utilities	K. Net Assets
Supplies and materials.	
Repairs and maintenance	L. Restricted Financial Assets
Contractual services	Restricted debt service reserve
Insurance, claims and settlements Misc (should not exceed 5% of total op expenses)	Restrictions for renewals and replacements Other restricted financial assets
Other	Total \$
Total	Total 9
roui	M. Unrestricted Financial Assets including cash
	on on one in the interest of the interest
compliance with section 47107(a) of the Title 49 United States Code and section 111(b	e Federal Aviation Administration I certify that the information on this form is true and accurate to the best of my knowledge
horization Act of 1994, please complete this form in order to assist the public in unders	· · · · · · · · · · · · · · · · · · ·
of airport generated revenue.	,,
port Mailing Address:	Signature Date
•	
	Printed name Telephone No.
	Title

information required by the Secretary. The burden for each response is estimated to be 5 hours. Responses are required to obtain a benefit. No assurance of confidentiality is given. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number. The OMB control number associated with this collection is 2120-0569.